pplication or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

10005162-1

| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | SMALI TYPE | SMALL ENTITY TYPE OF | | | OTHER THAN R SMALL ENTITY | | | | | | | |
|--|---|---|-------------------|------------------------------|----------------------------------|------------------|-----------------|--|--|-------|---------------------------|--|--|--|--|--|--|--|
| TOTAL CLAIMS | | | 20 | | | | RAT | Е | FEE | | RATE | FEE | | | | | | |
| FOR | | | NUMBER F | ILED 🎏 | NUMB | ER EXTRA | BASIC | FEE | 355.00 | OR | BASIC FEE | 710.00 | | | | | | |
| TOTAL CHARGEABLE CLAIMS | | | 20 min | us 20= | . (| 1 | X\$ 9 |)= | | OR | X\$18= | | | | | | | |
| INDEPENDENT CLAIMS | | | | nus 3 = | • | | X40 | = | | OR | X80= | 80 | | | | | | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | | | | +135 | ;= | · | OR | +270= | | | | | | | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | , TOT | ٦L | | OR: | TOTAL | 790 | | | | | | |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | | SMALL ENTITY OR | | | | OTHER THAN SMALL ENTITY | | | | | | | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVI PAID | HEST MBER OUSLY FOR | PRESENT EXTRA | RAT | E | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | | | | | | |
| Ş. | Total | | Minus | •• | arikiriya | _ | X\$ 9 |)=· | * | OR | X\$18= | | | | | | | |
| WEI S | Independent | | Minus | *** | T 01 | = | X40 | = | | OR | X80= | | | | | | | |
| | FIRST PRESE | NTATION OF MU | JUIPLE DEF | ENDEN | I CLAIN | | +135 | <u>}=</u> | | OR | +270= | | | | | | | |
| | | | | | | | | TAL | | OR. | TOTAL ADDIT, FEE | | | | | | | |
| | | (Column 1) | | (Colu | ımn 2) | (Column 3) | ADDIT. | ret | | 4 | הטטוו. רבב | | | | | | | |
| ENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGI NUM PREVI | HEST MBER IOUSLY D FOR | PRESENT EXTRA | RAT | Έ | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | | | | | | |
| AMENDMENT | Total | • | Minus | ** | | = | X\$ 9 | }= | | OR | X\$18= | <u>L</u> | | | | | | |
| AME | Independent | * | Minus | *** | T CL | = | X40 |)= | | OR | X80= | | | | | | | |
| Ľ | FIRST PRESE | NTATION OF M | ULTIPLE DEI | PENDEN | II CLAIN | | +135 | 5= | | OR | +270= | | | | | | | |
| | | | | | | | TC ADDIT. | TAL FEE | | OR | TOTAL ADDIT. FEE | | | | | | | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | | | | | | | | | | | |
| AMENDMENT C | | CLAIMS REMAINING AFTER AMENDMENT | | NUI PREV | HEST MBER /IOUSLY D FOR | PRESENT EXTRA | RAT | E | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | | | | | | |
| | Total | • | Minus | ** | | = | X\$ 9 | | | OR | X\$18= | | | | | | | |
| ME | Independent | • | Minus | *** | | = | X40 | —-)= | | 1 | V00 | | | | | | | |
| Ľ | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | +13! | | | OR | | | | | | | | |
| | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. | | | | | | | | <u></u> | OR | | | | | | | | |
| ** | ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT FFF | | | | | | | | | | ADDIT. FEE | | | | | | | |
| l " | The "Highest Nu | imper Previously F | aid For" (Total (| no opaci or indepen | ∟ is iess u ident) is t | he highest numb | er found in the | ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | |